



**STATE OF WEST VIRGINIA  
DEPARTMENT OF TAX AND REVENUE  
ALCOHOL BEVERAGE CONTROL ADMINISTRATION**  
322 70<sup>th</sup> Street, SE  
Charleston, West Virginia 25304-2900

**INSTRUCTIONS FOR NON-RETAIL LIQUOR & WINE LICENSE APPLICATION**  
**(FORM # ABCC-WS-3)**

1. Please read the instructions carefully. All questions are to be answered in full. Your accuracy and thoroughness in completing the application form will assist us in processing the application and preventing unnecessary delays.
2. False representations made in application or failure to comply with Chapter 60 of the West Virginia Code (State Control of Alcoholic Liquors) and rules and regulations promulgated thereunder may result in denial, revocation, or suspension of the license.
3. Any person holding any interest in a Wine Supplier, West Virginia Licensed Wine Distributor, or West Virginia Farm Winery may not hold any interest in a retail wine establishment or a private wine restaurant.
4. Any person holding any interest in a West Virginia Distillery or a West Virginia Mini-Distillery may not hold any interest in a retail liquor, private club, or private wine restaurant establishment.
5. Licensing Periods:
  - Wine Supplier, Wine Distributor, Farm Winery, and Direct Shipper license periods begin July 1 and end June 30 of each year.
  - Distillery and Mini Distillery license periods begin January 1 and end December 30 of each year.
6. Acceptable forms of payment of license fees are certified check, cashier's check, company check, or money order payable to the West Virginia Alcohol Beverage Control Administration. If the license for a Wine Supplier, Wine Distributor, or Direct Shipper is issued for less than a full year, the fee may be prorated as follows:

License Application Submitted  
July 1 through June 30  
January 1 through June 30

License Fee  
Full License Fee  
½ of License Fee

7. The application must be signed as follows and all signatures must be notarized:
  - If an individual, by the owner.
  - If a firm, each member of the firm.
  - If a partnership, each member of the partnership.
  - If an association, each member of the governing board.
  - If a corporation, by either its president or a vice president.

8. Documents which must accompany application:

- If an Association - a copy of the Certificate of Authority and Agreement of Association
- If a Limited Liability Corporation - a copy of the Certificate of Authority and Articles of Organization
- If a Corporation - a copy of the Certificate of Authority and Articles of Organization
- A copy of the applicant's federal basic permit, as required under the Federal Alcohol Administration Act.
- A copy of West Virginia business license registration.
- If out-of-state entity, a copy of current ABC license from state of domicile.
- A Letter of Good Standing from State of West Virginia and if an out-of-state entity, a letter of good standing from the state of domicile. (Forms to request a Letter of Good Standing from the State of West Virginia are included.)
- If applying as a resident Distillery or Mini Distillery; submit copies of all documents which have been submitted to the Bureau of Alcohol, Tobacco, and Firearms, along with documentation of ATF's inspection report and approval.

9. A farm winery license shall be issued only to, or held by, an applicant qualified to operate or who is operating a winery or wine cellar bonded under the laws and regulations of the United States. Form and instructions are available by calling the toll-free number at 800-937-8864 or available through download at <http://www.ttb.gov/alcohol/permits.htm>

10. Distilleries, Mini Distilleries, and Wine Distributors (wholesalers) are required to buy a Special Tax Stamp from the Internal Revenue Service. Additional information and application for the Special Tax Stamp can be made on TTB Form 5630.5 or you can request a packet with the form and instructions by calling the toll-free number at 800-937-8864 or available through download at [http://www.ttb.gov/taxes\\_and\\_permits/fed\\_tax\\_stamp.htm](http://www.ttb.gov/taxes_and_permits/fed_tax_stamp.htm)

11. Wine Supplier & Distributor Bonds - Please see bond instructions for proper completion.

- Wine Suppliers - Applicants must complete bond form #ABCC-WS-3-B in the amount of \$10,000.00.
- Wine Distributors - Applicants must complete bond form #ABCC-WS-1-B in the amount of \$10,000.00.

12. Direct shippers must provide a list of brands that are to be shipped into West Virginia.

13. All completed applications, with supporting documents, and the required license fees, are to be returned to:

West Virginia ABC Administration  
Wine Division  
322 70<sup>th</sup> Street, S. E.  
Charleston WV 25304

14. If there are additional questions concerning the proper completion of an application, inquiries can be made to the Alcohol Beverage Control Commissioner at (304) 558-2481 between the hours of 8:30 a.m. and 4:30 p.m. E.S.T. Monday through Friday.



Licensing Period: \_\_\_\_\_ to \_\_\_\_\_

License Number: \_\_\_\_\_

Applying As:

- ☐ Individual  
☐ Partnership  
☐ Ltd. Partnership  
☐ Ltd. Liability  
☐ Corporation  
☐ Association

## West Virginia Alcohol Beverage Control Administration

322 70th Street, SE Charleston, WV 25304-2900  
(304) 558-2481

### Non-Retail Liquor and Wine License Application

<input type="checkbox"/> Wine Supplier	<input type="checkbox"/> Distillery	<input type="checkbox"/> Mini Distillery	<input type="checkbox"/> Farm Winery	<input type="checkbox"/> Multi Capacity	<input type="checkbox"/> Wine Distributor	<input type="checkbox"/> Direct Wine Shipper
Answer Questions 1-16 License Fee: \$150.00	Answer Questions 1-16 Complete Section I License Fee: \$1500.00	Answer Questions 1-16 Complete Sections I & III License Fee: \$50.00	Answer Questions 1-16 Complete Sections I & III License Fee: \$50.00	Answer Questions 1-16 License Fee: \$300.00	Answer Questions 1-16 Complete Sections I & II License Fee: \$2500.00	Answer Questions 1-16 License Fee: \$ \$150.00 to ship <14% Alc. Cont. or \$250.00 to ship <14% Alc. Cont. & Certain Dessert Wines

1. Licensee (Entity): \_\_\_\_\_ 4. Business FEIN: \_\_\_\_\_

2. Business Name: \_\_\_\_\_ 5. Business Telephone: (\_\_\_\_\_) \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_ 6. Physical Business Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

7. Contact Person: \_\_\_\_\_ Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

8. Has applicant or any officer been:
- a. Convicted of a felony? Yes \_\_\_\_\_ When: \_\_\_\_\_ If yes, attach sheet to explain. No \_\_\_\_\_
  - b. Convicted of a violation of federal or state alcohol laws? Yes \_\_\_\_\_ If yes, attach sheet to explain. No \_\_\_\_\_
  - c. Convicted of a criminal offense (misdemeanor) within the last 5 years? Yes \_\_\_\_\_ If yes, attach sheet. No \_\_\_\_\_
  - d. Refused any type of alcohol license or permit in any state? Yes \_\_\_\_\_ State: \_\_\_\_\_ If yes, attach sheet. No \_\_\_\_\_

9. Has applicant or any officer had:
- a. A hearing before the WVABCA Commissioner? Yes \_\_\_\_\_ Explain: \_\_\_\_\_ No \_\_\_\_\_
  - b. Any type of WVABCA license or permit sanctioned? Yes \_\_\_\_\_ Explain: \_\_\_\_\_ No \_\_\_\_\_

10. Has applicant been refused any type of alcohol license or permit in any state? Yes \_\_\_\_\_ Explain: \_\_\_\_\_ No \_\_\_\_\_

11. Does the applicant, officers, directors or any blood relative own any real estate, buildings or equipment used by any WV retail licensee? Yes \_\_\_\_\_ Attach a written explanation and give name, address and interest. No \_\_\_\_\_

12. Does applicant, partner, member, stockholder, director, or any blood relative hold any interest in a licensed retailer in West Virginia? Yes \_\_\_\_\_ Attach a written explanation and give name, address and interest. No \_\_\_\_\_

13. Date and State your business incorporated or organized: \_\_\_\_\_

Please include corporate charter or organization papers

14. Do you have a Special Tax Stamp from Alcohol & Tobacco Tax & Trade Bureau? Yes \_\_\_\_\_ Applied for \_\_\_\_\_ No \_\_\_\_\_

15. If non-resident business, date of certificate of authority to do business in WV: \_\_\_\_\_

Please include copy of certificate of authority

16. Supply the following information about the owners, officers, directors and manager:

Title: _____ Name: _____ Res. Address: _____ _____ Phone: (_____) _____ % Ownership: _____ DOB: _____ SSN: _____ - _____ - _____ WV Resident: Y / N US Citizen: Y / N	Title: _____ Name: _____ Res. Address: _____ _____ Phone: (_____) _____ % Ownership: _____ DOB: _____ SSN: _____ - _____ - _____ WV Resident: Y / N US Citizen: Y / N	Title: _____ Name: _____ Res. Address: _____ _____ Phone: (_____) _____ % Ownership: _____ DOB: _____ SSN: _____ - _____ - _____ WV Resident: Y / N US Citizen: Y / N
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**Section I: To be completed by Wine Distributors, Farm Wineries, and Mini Distilleries.**

- A. County which business is located: \_\_\_\_\_
- B. Does the applicant own the premises to be licensed? Yes: \_\_\_\_\_ No: \_\_\_\_\_ If no, does applicant hold a valid lease? Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration date of lease: \_\_\_\_\_  
Property owner name/address \_\_\_\_\_
- C. Do the premises to be licensed conform to Health, Fire and Zoning Regulations? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Section II: To be completed by Wine Distributors.**

- A. Has applicant entered into any exclusive franchise agreement with a manufacturer, producer, processor, distributor or supplier of wine whereby the applicant has been given the exclusive right within West Virginia or in any given territory within West Virginia to distribute the product(s) of such manufacturer, producer, processor, distributor or supplier which are to be sold or distributed in West Virginia? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain \_\_\_\_\_

**Section III: To be completed by Farm Wineries and Mini Distilleries.**

- A. Annual productive capacity is \_\_\_\_\_ gallons.
- B. Is applicant, directly or indirectly, by means of signs, equipment, money, property or otherwise, giving aid or assistance to the holder of any retail beer or intoxicating liquor permit issued by the authority of this State? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, explain: \_\_\_\_\_
- C. Does applicant own or control any real or personal property, which is rented, leased or used by the holder of any retail beer or intoxicating liquor permit issued by the authority of this State? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain: \_\_\_\_\_
- D. Is your place of business in a section zoned by a county or municipality? \_\_\_\_\_ If so, state district: \_\_\_\_\_
- E. Give numbers and classification of former beer, wine and spirituous liquor permits, if any: \_\_\_\_\_
- F. Name nearest church or school and state distance in feet therefrom: \_\_\_\_\_
- G. Is place of business located in business, residential, or rural neighborhood? \_\_\_\_\_

Should the applicant fail to fully carry out and fulfill in every respect the laws of West Virginia, then the Commissioner shall have the right to terminate or revoke this license or permit and declare forfeited the penalty of the bond (if a bond is required for the selected license type). However, it is agreed and understood by and between the parties hereto that before such bond shall be forfeited a hearing shall be held in the Office of the West Virginia Alcohol Beverage Control Commissioner in the City of Charleston, Kanawha County, West Virginia, after ten (10) days written notice to the applicant, setting forth the charge or charges and the time and place of hearing thereon and which said notice shall be served the applicant by registered mail at the address hereinabove set forth.

- Instructions for signing:
- 1) Partnership/Limited Partnership: Must be signed by all partners.
  - 2) Ltd Liability Company: Must be signed by all members, if member managed.  
Must be signed by manager, if manager managed.
  - 3) Association: Must be signed by all members.
  - 4) Corporation: Must be signed by an officer in the corporation.
  - 5) Individual: Signature of that individual.

**Note: All changes in ownership interest during the license year must be reported immediately to the WV ABCA Commissioner.**

STATE OF \_\_\_\_\_,  
COUNTY OF \_\_\_\_\_, to wit:

In support of the foregoing application, the undersigned makes oath that the statements contained therein and all attachments are true to the best of his/her knowledge and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Given under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature of Notary Public

Commission Expires



MAIL TO:  
Administrative Support Unit  
1001 Lee Street East  
Charleston WV 25301

**STATE OF WEST VIRGINIA  
STATE TAX DEPARTMENT**

**Attention Administrative Support Unit**  
**Internal Auditing Division** Fax (304) 558-8643  
**State Tax Department** Phone (304) 558-0640

**DATE:**

This is to request a Letter of Good Standing from the West Virginia State Tax Department for:

Tax Identification Number: \_\_\_\_\_

Complete Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Is the business a Partnership? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is the business a Sole Ownership? \_\_\_\_\_ Yes \_\_\_\_\_ No

Additional Comments or Information:

If you would like the response to be returned to you by facsimile, please note your fax number here:

(\_\_\_\_\_) \_\_\_\_\_

Also, if you would like this letter to be faxed to the Secretary of State as well, please indicate so here and if there is a particular person at that office you wish the letter to be faxed to, please indicate that person's name here:

\_\_\_\_\_

I also understand that the secrecy provisions of the West Virginia Tax Procedure and Administration Act (WV Code §11-10) prevent the Tax Department from disclosing any information without having a waiver of confidentiality. I am at this time completing the waiver (form WV-ARI-001) and am attaching it to this request.

I also understand that in the event that this business is not in good standing with the Tax Department I will be notified in writing as to what tax returns or tax payments are considered not filed or paid and who to contact with any questions regarding that situation.

Signature and Title of Person Requesting the Letter of Good Standing:

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

**Authorization to Release Information**

Name of Taxpayer \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

West Virginia Identification, SSN, FEIN or Other \_\_\_\_\_

The above named taxpayer does hereby waive the confidentiality provisions of West Virginia Code § 11-10-5d and/or § 11-1A-23 to the following extent:

**1. Persons to whom information may be released:**

Name \_\_\_\_\_ Capacity \_\_\_\_\_

Address \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

City, \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**2. Effective period of this waiver:**

\_\_\_\_\_ authorization terminates \_\_\_\_\_  
month day year

\_\_\_\_\_ until my liability for the delinquent tax or taxes checked in paragraph 3, below, is satisfied

☒ other (explain) Upon issuance of Letter of Good Standing

**3. Taxes and/or credits to which this waiver applies:**

	W. Va. Code		W. Va. Code
_____ Beer Barrel Tax	11-16	_____ Minimum Severance Tax on Coal	11-12B
_____ Business and Occupation Tax	11-13	_____ Motor Carrier Road Tax	11-14A
_____ Business Franchise Tax	11-23	_____ Personal Income Tax	11-21
_____ Business Registration Tax	11-12	_____ Property Taxes	
_____ Charitable Raffle Boards & Games	47-23	_____ Severance Tax	11-13A
_____ Consumers Sales & Service Tax	11-15	_____ Solid Waste Fee	20-5F
_____ Corporate License Tax	11-12C	_____ Soft Drink Tax	11-19
_____ Corporate Net Income Tax	11-24	_____ Strategic Research and Development	
_____ Economic Opportunity Tax Credit	11-13Q	_____ Tax Credit	11-13R
_____ Employers Withholding Tax	11-10	_____ Telecommunications Tax	11-13B
_____ Estate Tax	11-11	_____ Tobacco Products Excise Tax	11-17
_____ Gasoline & Special Fuel Excise Tax	11-14	_____ Use Tax	11-15A
_____ Health Care Provider Taxes	11-27	_____ Wine Liter Tax	60-8
_____ IFTA	11-14B	<input checked="" type="checkbox"/> All of the above applicable to the taxpayer	
_____ Manufacturing Investment Tax Credit	11-13S	_____ Other Taxes (as listed below)	

**4. Information to be released: (describe specifically)**

Letter of Good Standing

\_\_\_\_\_

\_\_\_\_\_

**5. Reason(s) why information is to be released:**

So as to obtain or renew a license with West Virginia Alcohol Beverage Control Administration

This waiver will be effective only to the extent explained above and any other release of information is not permitted without additional authorization. Additionally, information will be released only to the extent the Tax Commissioner believes disclosure is necessary to comply with this Authorization to disclose information, and will not be disclosed to the extent the Tax Commissioner determines that disclosure would seriously impair administration of this State's tax laws.

This authorization must be signed by the taxpayer, or taxpayer's authorized representative, and the signature of the person signing the authorization must be notarized.

Authorization is for:

- release of a jointly filed personal income tax return, the authorization must be signed by either the husband or the wife
- release of a return filed by a business that is a sole proprietorship, the authorization must be signed by the owner of the business or by an employee of the business, or other person, who is authorized to sign the authorization.
- a corporation, the authorization must be signed by its president, vice president, treasurer, assistant treasurer, chief accounting officer or other person duly authorized to sign the authorization.
- release of a return filed by a partnership, as defined for federal income tax purposes, the authorization must be signed by the managing partner, or tax matters partner, or any other partner or employee of the partnership authorized to sign the authorization.
- release of a return filed by a limited liability company, the authorization must be signed by the managing member, tax matters member, or any other member or employee of the limited liability company authorized to sign the authorization.
- a return filed by an estate or trust, the authorization must be signed by the executor or executrix of the estate, or the trustee of the trust.
- for information other than a tax return, the authorization must be signed by a person who could authorize release of taxpayer's tax return.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Capacity

\_\_\_\_\_  
Date

State of West Virginia,

County of \_\_\_\_\_, to-wit,

This day appeared before me, the undersigned notary public, \_\_\_\_\_ who  
acknowledge under oath the signature above. Print Taxpayer's Name

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

My commission expires \_\_\_\_\_